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STATE OF CALIFORNIA STATE WATER RESOURCES CONTROL BOARD Division of Water Rights

P.O. BOX 2000 SACRAMENTO, CA 95810 901 P.ST. SACRAMENTO, CA (916) 322-4503

SUPPLEMENTAL STATEMENT OF WATER DIVERSION AND USE

TENMECO WEST, INC. F O BOX 9380 BAKERSFIELD, CALIF 93389 IF NAME/ADDRESS/PHONE NO. IS WRONG OR MISSI SOURCE: SANTIAGO MESA #1 SPRING	TELEPHONE NUMBER: (805) 835-6030
F O BOX 9380 BAKERSFIELD, CALIF 93389 IF NAME/ADDRESS/PHONE NO. IS WRONG OR MISSI	TELEPHONE NUMBER: (805) 835-6030
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SOURCE: SANTIAGO MESA #1 SPRING	ING, PLEASE CORRECT.
	i
TRIBUTARY TO: UNNAMED STREAM	i.
COUNTY: KERN	
DIVERSION WITHIN: SE1/4 OF NE1/4 SECTION 23, T10N, R2) .masez www.
NSTRUCTIONS: Please complete Items A. B and C. Item D shoull or part of your regular water supply with reclaimed or post this form by July 1, 1985. (Additional information	and the formation of
A. Amount of Use - Fill in the amount of water used each month. If monthly and annual use are not known, check the months in which water was used.	Amounts Gailons below are: Acre-feet C (other
Jan Feb Mar Apr May June July Aug Se	Total Ppt Oct. Nov. Dec. Annual
1782. 1 1 1 1 1 1 1 1	PPI Oct. Nov Dec Annual
1933 // // // // // //	
1984 V V V V V V V V	
B. Purpose of Use - Specify number of acres irrigated, stock	watered, persons served, etc.
Irrigation	
Stockwatering 35 holdsy	
Domestic	
Other (specify)	
Changes in Method of Diversion - Describe any changes previous statement was filed. (New pump, enlarged dive diversion, etc.)	in your project since your rsion dam, location of